11/13/2024

## **United States District Court Northern District of Illinois**

## **Notification of Party Contact Information**

**Directions**: This form must be attached to a motion to withdraw from a case when no other attorney of record has been noted on the docket. A completed form must be electronically filed as an attachment to the motion to withdraw. The address and telephone number of your client must be completed on this form to enable the Court to contact your client in the future if the motion to withdraw is granted.

Case Number:	
Case Title:	
Judge:	
Name of Attorney	submitting the motion to withdraw:
Name of Client:	
Mailing address o	f Client: 1942 Broadway St, Ste 314C
City:	State:
Zip:	Telephone Number:
Email address of (	Client:
I attest that the abo	ove information is true and correct to the best of my
Signed:	son S Cols
<b>Date:</b> 11/18/2024	